



# Incident Report

**Print Date/Time:** 02/11/2016 09:32  
**Login ID:** ss0139

Lake Stevens Police Department  
**ORI Number:** WA0311900

**Incident:** 2016-00002325

**Incident Date/Time:** 2/4/2016 5:24:38 PM  
**Location:** 12TH PL SE / 91ST AVE SE  
LAKE STEVENS WA 98258  
**Phone Number:** (425) 583-4767  
**Report Required:** No  
**Prior Hazards:** No  
**LE Case Number:**

**Incident Type:** Collision  
**Venue:** Lake Stevens  
**Source:** 911  
**Priority:** 3  
**Status:** 3  
**Nature of Call:**

## Unit/Personnel

Unit	Personnel
19D1	SS0075-Christensen

## Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Reporting Party	JENNY					

## Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State
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## Disposition(s)

Disposition	Count
R	1

## Property

Date	Code	Type	Make	Model	Description	Tag No.	Item No.
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**02/04/2016 : 17:26:07 SP0213 Narrative: CC, NON INJ, NON BLOCKING, RED HYUNDAI ELANTRA VS CHEVY TAHOE**


**STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT**


1591971

**REPORT NO. E514310**

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

TRIBAL RESERVATION	
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CASE #	16-00002325
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LOCAL AGENCY CODING	0664
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TOTAL # OF UNITS	02	OBJECT STRUCK	
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M	M	D	D	Y	Y	Y	Y	TIME (2400)	COUNTY #	MILES	N	E	IN	OF	CITY #
DATE OF COLLISION	02	-	04	-	2016			1724	31						0664

ON (PRIMARY TRAFFIC WAY)	INTERSECTION <input checked="" type="checkbox"/>	NON-INTERSECTION <input type="checkbox"/>
91ST AVE SE		BLOCK NO. <input checked="" type="checkbox"/> 1200
		MILE POST

DISTANCE		MILES	N	E	OF (REFERENCE OR CROSS STREET)
			S	W	12TH ST SE

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 4252939525
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LAST NAME	JOHNSON	FIRST NAME	KAITLYN	MIDDLE INITIAL	M
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STREET NEW ADDRESS	18320 113TH ST NE
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CITY	GRANITE FALLS	ST	WA	ZIP	982529663
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	JOHNSKM084DQ	STATE	WA	SEX	F	D.O.B. MMDDYYYY	03	-	18	-	1992
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	AED7484	STATE	WA	VIN#	KMHDN46D44U910815
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TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR	2004	MAKE	HYUN	MODEL	ELANTR	STYLE	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. ESTER STEFFEY PO BOX 1323 LAKE STEVENS WA 98258

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	GEICO 4212-66-04-52
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VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE
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UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 3604407779
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LAST NAME	BAZAN	FIRST NAME	ISRAEL	MIDDLE INITIAL	
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STREET NEW ADDRESS	19928 47TH AVE NE
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CITY	ARLINGTON	ST	WA	ZIP	982236372
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	BAZANI*338LB	STATE	WA	SEX	M	D.O.B. MMDDYYYY	06	-	02	-	1967
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE	INJURY CLASS	7	NATURE OF INJURIES BACK PAIN, PREVIOUS BACK INJURY
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LICENSE PLATE #	283XRS	STATE	WA	VIN#	1GNEK13T11J133915
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TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR	2001	MAKE	CHEV	MODEL	TAHOE	STYLE	UT	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. ISRAEL BAZAN PO BOX 2014 GRANITE FALLS WA 98252

LIABILITY INSURANCE IN EFFECT <input type="checkbox"/>	INSURANCE CO & POLICY #	
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VEHICLE LEGALLY STANDING YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE
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OFFICER'S NAME (PRINT)	C. CHRISTENSEN	BADGE OR ID #	0075	AGENCY	WA0311900
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**STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT**


1591972

CORRECTION

REPORT NO. **E514310**CASE # **16-00002325**
**ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)**

NAME (LAST, FIRST, MIDDLE INITIAL)																							
ADDRESS & PHONE #												SEX		D.O.B. MMDDYYYY									
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES					
NAME (LAST, FIRST, MIDDLE INITIAL)																							
ADDRESS & PHONE #												SEX		D.O.B. MMDDYYYY									
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES					
NAME (LAST, FIRST, MIDDLE INITIAL)																							
ADDRESS & PHONE #												SEX		D.O.B. MMDDYYYY									
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES					

**NARRATIVE**

Unit 2 was stopped for the vehicle in front of it to turn left. Driver of Unit 1 said she reached over to adjust her car radio and did not see Unit 2 stop and ran into Unit 2 at its rear bumper. Driver of Unit 2 complained of back pain, but stated he had a previous back injury and declined aid. Unit 1 was towed from the scene by AAA and Unit 2 was driven from the scene.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

**C. CHRISTENSEN**
**02-09-16 07:41 AM**

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

DATED

PLACE SIGNED

APPROVED BY

**R. BROOKS 0013**

DATE

**2/10/2016 6:05:06 PM**

BADGE OR ID #	<b>0075</b>	ORI #	<b>WA0311900</b>	TIME POLICE DISPATCHED	<b>5:24 PM</b>	TIME POLICE ARRIVED	<b>5:38 PM</b>
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REPORT NO. E514310

CASE # 16-00002325

DATE AND TIME  
OF COLLISION 02/04/16 17:24

